

***USSSA  
ATLANTIC COAST  
MENS CLASS D NATIONAL  
TOURNAMENT  
AUGUST 28-29, 2010***



2010 USSSA  
MEN'S CLASS D ATLANTIC COAST NATIONAL TOURNAMENT  
AUGUST 28-29, 2010

West Metro Atlanta Softball Complex  
Atlanta, Georgia

**Congratulations! Your team has qualified to enter the 2010 USSSA Men's Class D Atlantic Coast National Tournament to be held August 28-29, 2010 at West Metro Atlanta Softball Complex in Atlanta, Georgia. West Metro Atlanta Softball Complex consists of 6 fields with 300' fence distances.**

**TOURNAMENT INFORMATION**

**WHERE & WHEN:** West Metro Atlanta Softball Complex-Atlanta, Georgia August 28-29, 2010. Depending on number of teams Friday may be necessary. All teams should be prepared to start Friday if needed.

**ENTRY FEE & FORMAT:** The entry fee for this double-elimination tournament is \$325.00. Only money orders, certified checks, or USSSA Director check will be accepted. Make checks payable to USSSA/JM Sports.

**DEADLINE FOR ENTRY FEE:** Wednesday August 11, 2010 is the deadline for receiving entries. All entries must be in *Your State Director's* possession by this date and in the *Tournament Director's* (from your State Director) by Monday August 16, 2010. **NO ENTRY WILL BE ACCEPTED UNLESS ENTRY FEE IS ENCLOSED OR ENTRY FEE HAS BEEN PAID ONLINE.** For a listing of State Director's and their contact information go to [www.ussa.com](http://www.ussa.com) and click on Slow Pitch Softball.

**ENTRY FEE & FORM:** All teams must abide by their local Tournament Qualification Rules administered by their respective Director's in qualifying for a berth in this event. Your entry fee of **\$325.00** must be paid online or be in *Your State Director's* possession by the deadline of August 11, 2010. *State Director's* should forward letter of transmittal by no later than *Monday August 16, 2010* to assure team's entry.

**RECOMMENDED ENTRY PROCEDURE:** All teams must be marked "qualified" on the [www.ussa.com](http://www.ussa.com) site by their State Director. Once a team has been marked "qualified", the team can enter and pay for the event online at [www.ussa.com](http://www.ussa.com). It is recommended that all entry fees be paid online through the [www.ussa.com](http://www.ussa.com) website. Additionally, teams must complete their entry form and travel information sheet and submit to their State Director by August 11, 2010. State Director's must also confirm the entries of all teams from their State into this National Tournament through the on-line berth approval process. State Director's must also insure that each team's frozen and approved roster is entered online at [www.ussa.com](http://www.ussa.com) **THIS IS MANDATORY!**

**TEAM'S ENTERING MANUALLY:** Enclose with the entry form the following:

1. Copy of receipt of online payment, cashier's check, or money order in the amount of **\$325** made payable to **USSSA/JM Sports**. No entry fee will be accepted without the correct tournament fee included.
2. **Team Roster:** Team roster must be entered online at [www.ussa.com](http://www.ussa.com) frozen and approved by their State Director. Failure to comply with this rule will result in your team's suspension from participation in this tournament.
3. Completed 2010 Men's Class D National Tournament entry form and travel form.

*The complete entry package should be sent to Your State Director who will then forward the material along with letter of transmittal to:*

GEORGIA USSSA  
Rusty Carter  
PO Box 847  
Buford, Georgia 30518  
678-407-0642  
email: rusty@georgiausssa.com

*\*\*\*Please forward a copy of Letter of Transmittal to [jeffrey.miller@charter.net](mailto:jeffrey.miller@charter.net)*

#### AWARDS

Team Award 1<sup>st</sup> thru 4<sup>th</sup> Place  
Individual Awards 1<sup>st</sup> & 2<sup>nd</sup> Place  
All Tournament Team  
Best Defensive Award  
Most Valuable Player Award

**GAME TIME & PAIRINGS:** Drawing will be conducted on Tuesday August 24, 2010. Brackets will be available on-line Wednesday August 25<sup>th</sup> after 12:00pm. Brackets will not be mailed or faxed out. Official brackets will be available at Saturday's manager meeting. For more information, contact Jeff Miller at 404-432-5779.

**MANAGER CHECK-IN & MEETING:** The tournament check-in/managers meeting will be held at Frank Brown Park on Saturday, August 28 at 8:00am. One representative per team MUST be in attendance; there will be NO EXCEPTIONS.

**BAT INSPECTIONS:** Bat inspection will be conducted on the field when the team plays their first game.

**CONDITIONS:** The right is reserved by the tournament director to change sites, dates, or make other changes to conduct this tournament. This would include changing tournament format in the event of inclement weather. All measures will be taken to complete this event.

**UNIFORMS:** Non-duplicating numbers are required on all teams' uniform jerseys. The numbers must be a minimum of 3 inches in size and clearly visible. Teams must wear similar uniforms. Protests on uniforms will not be allowed. It shall be the tournament director's responsibility regarding to determine uniform legality.

**BALLS:** Teams provide their own USSSA approved Classic M Softball.

**RULE 16 section 6:** The game may start with 9 players; however, an out shall be declared when the 10<sup>th</sup> position in the lineup is scheduled to bat. A 10<sup>th</sup> player may be added in the 10<sup>th</sup> position anytime before the end of the game. A team that starts with 10 or 11 players may drop to a minimum of 9 players to finish a game. All vacant spot(s) in the lineup will be declared an out every time that lineup position is due to bat. If a player is ejected from the game for any reason the team must have a substitute available to replace the ejected player or the team will forfeit the game. If a team starts with 9 or 10 players they are not allowed to add the 11<sup>th</sup> player at a later time.

All participants must have a photo ID.

**HOME RUN LIMIT:** 0 Home Runs per team, per game.

**RUN RULE:** 15 AFTER 5 (FLIP FLOP AFTER 4<sup>TH</sup>).

**TOURNAMENT HEADQUARTERS:** Tournament Headquarters will be located at West Metro Atlanta Softball Complex – 404-432-5779 – 7301 Campbellton Road SW, Atlanta, Georgia 30080.

**ADMISSION POLICY:** Admission for this tournament is \$5.00 per day. This charge will be in effect for everyone over 16 years of age. Rostered players, coaches, and managers must be in uniform to gain free entry.

**USSSA SLOW PITCH SOFTBALL  
ENTRY FORM MEN'S CLASS D  
ATLANTIC COAST NATIONAL TOURNAMENT**

Name of Team: \_\_\_\_\_

From (City and State): \_\_\_\_\_

Manager's Name: \_\_\_\_\_ Manager's Telephone Number: \_\_\_\_\_

Manager's Complete Mailing Address: \_\_\_\_\_  
Zip: \_\_\_\_\_

Team Sponsored by: \_\_\_\_\_ Current Season's Record: Won \_\_\_\_\_ Lost \_\_\_\_\_

Current Season's Championships Won: \_\_\_\_\_

Past National or World Titles Won: \_\_\_\_\_

Note: Please attach any publicity data concerning individual or team performance such as newspaper clippings, pictures, etc.

Enclosed is a cashiers check or money order in the amount of \$ 325 to cover our entry fee.

**CODE OF UNDERSTANDING**

1. This entry form, along with entry fee, must be submitted to your State Director. Teams will not be allowed to forward entry fee directly to the World Tournament Director. In the event a State does not have a State Director, then this form must be submitted to your Division Vice-President. Entry forms will be returned, as unaccepted, to teams that fail to follow this procedure.
2. The World Tournament Director is under no obligation to accept an entry that arrived after the bracket is drawn.
3. All teams must be completely uniformed alike when competing in a World Tournament.
4. Any team that submits a bad check for payment of entry fee or motel bills will be subject to disbarment.
5. Any teams destroying property or involved in theft of motel property will be subject to disbarment.
6. My team stands ready to play on Friday Night if so scheduled.

I agree with above code of understanding.

**RELEASE**

I, the undersigned, manager of the team shown on this entry form hereby state that the team represented by its roster, is a voluntary participant in this tournament which is sanctioned by the United States Specialty Sports Association (USSSA). In consideration of this acceptance of our application to participate in said tournament we do hereby release and forever discharge USSSA of and from all liabilities, claims, actions, and possible causes of action whatsoever that may accrue to us or to our heirs from every and any loss and injury including death that may be sustained by our person or property while, in about, or route into and away from said tournament. AND WHEREAS, the undersigned is aware of the dangerous nature of our undertaking as it relates to loss of life and/or limb, therefore, it is agreed as follows: That in consideration of being allowed to participate in said tournament, the undersigned team through its manager hereby voluntarily assumes all risks from accident or damage to person or property hereby releases USSSA from every claim, liability, or demand of any kind for an account of any personal injury or damage of any kind sustained or caused by the negligence of the USSSA, its sponsors or otherwise.

I have read and understand the foregoing release and code of understanding.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**TRAVEL INFORMATION SHEET**

**PLEASE FILL OUT THIS FORM**

**(It is extremely important that the following information be filled out completely. This is how we contact your team if there are any changes to the tournament).**

**TEAM NAME:** \_\_\_\_\_

**TEAM LOCATION (CITY):** \_\_\_\_\_ **(STATE):** \_\_\_\_\_

**MANAGER:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**MOTEL/CONDO:** \_\_\_\_\_

**NUMBER OF ROOMS BOOKED:** \_\_\_\_\_ **NUMBER OF NIGHTS:** \_\_\_\_\_

**NAME ROOMS ARE RESERVED UNDER:** \_\_\_\_\_

**NUMBER OF PEOPLE IN YOUR GROUP:** \_\_\_\_\_

**METHOD OF TRAVEL:** \_\_\_\_\_

**EXPECTED ARRIVAL DATE:** \_\_\_\_\_

**MILEAGE OF TRAVEL:** \_\_\_\_\_

**FORWARD THIS INFORMATION TO:**

**JM SPORTS  
7301 CAMPBELLTON RD. SW  
ATLANTA, GEORGIA 30331**

**404-344-3568 (FAX)**

---